PETITIO	N FOF	R EXTENSION OF	TIME UNDER 37 CFR 1	1.136(a)	Docket Number (Optional) 020460-000910US	
			In re Application of SIRI	IAN, MOTA	ASIM et al.	
			Application Number 09/	783,253	Filed February 13, 2001	
For APPARATUS AND METHODS FOR CONTROLLED DELIVERY FROM IMPLANTED PROSTHESES						
			Art Unit 3738	Ex	xaminer PHAN, H.	
This is a rapplicatio		under the provisions	of 37 CFR 1.136(a) to exte	end the pe	riod for filing a reply in the above identified	
The reque	ested e	xtension and appropri One month (37 CFR	•	re as follow	vs (check time period desired): \$110	
		Two months (37 CF	R 1.17(a)(2))		\$	
		Three months (37 C	FR 1.17(a)(3))		\$	
		Four months (37 CF	R 1.17(a)(4))		\$	
		Five months (37 CF	R 1.17(a)(5))		\$	
		Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ .				
	A che	A check in the amount of the fee is enclosed.				
	Paym	Payment by credit card. Form PTO-2038 is attached.				
	The Director has already been authorized to charge fees in this application to a Deposit Account.					
$\boxtimes$	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.					
	I have	e enclosed a duplicate	copy of this sheet.			
I am the applicant/inventor		applicant/invento	r.			
			of the entire interest. See 37 CFR 3.71 er 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
	$\boxtimes$	attorney or agent of	record Registration Nun	nber 47,40	00	
		attorney or agent un	der 37 CFR 1.34(a).			
		Registration number if a	ting under 37 CFR 1.34(a).	<u>·</u> ·		
			form may become public d information and autho		card information should not be included on PTO-2038.	
	5-	10-04			Mno	
		Date			Signature	
					Nena Bains, Reg. No. 47,400	
					Typed or printed name	
NOTE O		all the females		4hi	and the (a) are an experience. Sub-sit and think for most if an experience if	
		all the inventors or assigned required, see below*.	es of record of the entire interest	or their repres	sentative(s) are required. Submit multiple forms if more	
★Total	of 1 for	ms are submitted.	<del></del>			

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